

Best Available Copy

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) | | | | | | SERIAL NO. | FILING DATE | | |
|--|------|------------------------|------|------------------------|------|--------------|-------------|------|------|
| | | | | | | APPLICANT(S) | 10/031524 | | |
| | | | | | | CLAIMS | | | |
| AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | | | |
| IND. | DEP. | IND. | DEP. | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| TOTAL | | | | | | TOTAL IND. | | | |
| TOTAL DEP. | | | | | | | 1 | 2 | 3 |
| TOTAL CLAIMS | | | | | | | 4 | 5 | 6 |

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office